

RESPONSE UNDER 37 CFR 1.116 EXPEDITED PROCEDURE EXAMINING GROUP 2837

Docket No.: 1572.1240

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Jin-hyuk CHOI et al.

Serial No. 10/802,926

Group Art Unit: 2837

Confirmation No. 5416

Filed: March 18, 2004

Examiner: Eduardo S. Colon

For: REACTION APPARATUS

AMENDMENT AFTER FINAL REJECTION

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Attention: BOX AF

Sir:

This is in response to the final Office Action mailed January 24, 2006, and having a period for response set to expire on April 24, 2006.

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.

OIPE 423

Win Als you

S&H Form: (02/05)

REPLY/AMENDMENT FEE TRANSMITTAL

Typed Name

Signature

Lisa A. Kilday

Attorney Docket No. 1572.1240

Application Number 10/802,926

Filing Date March 18, 2004

First Named Inventor Jin-hyuk CHOI et al.

Group Art Unit 2837

Examiner Name Eduardo S. Colon

					Group Art Unit		28:	2837			
AMOUNT ENCLOSED			0.00		Examiner Name		Ed	Eduardo S. Colon			
		· · · · · · · · · · · · · · · · · · ·	FEE	CALCUL	ATION (fees effectiv	/e 12/08/	(04)			
	CLAIMS AS Claims Re AMENDED After Ame			Highest Number Previously Paid For		Number Extra		Rate	Calculations		
TOTA	L CLAIMS		41	_	43 =	0		X \$ 50.00 =	\$ 0.00		
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cove	the date thi	s reply is f	an <u>original</u> due iled for which); (4 months (\$	the requisite	e fee is en	closed (1 mc	for an e onth (\$12	extension to 0)); (2 months			
			sed, add (\$500						<u> </u>		
			r Rule 20(d) is			130.00)		<u> </u>	<u> </u>		
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)											
Total of above Calculations =									\$	0.00	
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)									\$		
TOTAL FEES DUE = (1) If entry (1) is less than entry (2), entry (3) is "0".										0.00	
	try (1) is less than d try (2) is less than 2										
	try (4) is less than a										
	try (5) is less than										
				MET	HOD OF	PAYMENT					
	Check enclosed as payment.										
	Charge "TOTAL FEES DUE" to the Deposit Account No. below.										
.⊠	No payment is enclosed.										
						IORIZATIO			,		
. \	If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: Deposit Account No. 19-3935 Deposit Account Name STAAS & HALSEY LLP										
SUBI											

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56,210

Reg. No.

Date